PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

plication or Docket Number ب

206941008000

(Column 1) (Column 2)								SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			21					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	BA	ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			2/ minus 20=		* /			X\$ 9=		OR	X\$18=	18
INDEPENDENT CLAIMS			2 minus 3 =		0			X40=		OR	X80=	
MU	LTIPLE DEPEN	ESENT		•			+135=		OR	+270=		
* If	the difference i	n column 1 is	less than zero, enter "0" in column			column 2		TOTAL		OR	TOTAL	728
	CL	AIMS AS A	MENDED - PART II								OTHER THAN	
		(Column 1)	Section of the sectio		mn 2)	(Column 3)	_ 5	SMALL E	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	, i	X\$ 9=	` .	OR	X\$18=	
	Independent	*	Minus	***	T OL 4114	=		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
BEST AVAILABLE COPY							L.	TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	AU	DIT. FEE			ADDIT: I CL	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	II CLAIN		1	+135=		OR	+270=	
								TOTAL		OR	TOTAL ADDIT. FEE	
			DÎT. FEE			ADDII. FEE						
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	umn 2) HEST MBER (IOUSLY D FOR	PRESENT EXTRA	۱г	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N S	Total	*	Minus	**		=	\prod	X\$ 9=		OR	X\$18=	/
ME	Independent	*	Minus	***]=	1	X40=		OR	X80=	
	FIRST PRESE	NTATION OF N	NULTIPLE DE	PENDE	NT CLAIN	И	」 -	. 105			+270=	
	If the entry in colu	ımn 1 is less than	the entry in col	umn 2, wr	rite "0" in c	column 3.		+135= TOTAL		OR	+270= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE												
1	The "Highest Nur	nher Previously P	aid For" (Total o	or Indeper	ndent) is ti	ne niahest numb	er toun	d in the ap	propriate bo	X ITI C	viumn 1,	